

Fresenius Kidney Care
3500 Lacey Road, Downers Grove, IL 60515
T 630-960-6807 F 630-960-6812 Email: lori.wright@fmc-na.com

RECEIVED

March 14, 2018

MAR 16 2018

HEALTH FACILITIES & SERVICES REVIEW BOARD

Ms. Courtney Avery Administrator Illinois Health Facilities & Services Review Board 525 West Jefferson, 2nd Floor Springfield, IL 62761

Re: Annual Progress Report. Section 1130.760

Project #16-049, Fresenius Kidney Care Macomb

Permit Holder: Fresenius Medical Care of Illinois, LLC, and Fresenius Medical Care

Holdings, Inc.

Permit Amount: \$2,223,191

Dear Ms. Avery:

Enclosed please find the annual progress report which summarizes the status of the abovementioned project.

If you have any questions, please contact me at 630-960-6807.

Sincerely,

Senior CON Specialist

cc: Clare Connor



March 14, 2018

Annual Progress Report, Section 1130.760

Project #16-049, Fresenius Kidney Care Macomb

Permit Holder: Fresenius Medical Care of Illinois, LLC, and Fresenius Medical Care

Holdings, Inc.

Permit Amount: \$2,223,191

This report summarizes the status of the above-mentioned project located at 212 E. Calhoun Street, Macomb.

Status of the Project

This project is for the relocation of a 6-station ESRD facility and the addition of 2 stations for a total of 8. The project was obligated with the execution of the lease on June 22, 2017. Construction is complete, and the facility began treating patients on March 12, 2018. The clinic is now waiting for inspection and CMS Certification to be complete.

Application and Certificate for Payment (AIA G702)

G-702 Attached

Anticipated Completion Date

The project 99% complete and is expected to be completed prior to December 31, 2018.



Sources and Uses of Funds

All Project financing to date has been funded from available cash and its equivalents as reported on the company's financial statements. The right to occupy the premises is secured through a leasing arrangement. This leasing arrangement is utilized to obligate the project. Project costs have not exceeded the approved permit amount.

Project Costs and Sources of Funds

Line Item	Allowance/CON	Realized Costs N/A
Preplanning Costs	N/A	
Site Survey & Soil Investigation	N/A	N/A
Site Preparation	N/A	N/A
Off-site work	N/A	N/A
New Construction Contracts	N/A	N/A
Modernization	840,048	840,048
Contingencies	83,028	142,297
Architectural/Engineering	92,000	78,500
Consulting and other fees	N/A	N/A
Movable & Other Equipment	325,000	216,659
Bond Issuance Expense	N/A	N/A
Net Interest Expense during Construction	N/A	N/A
FMV of Leased Space & Equipment	883,115	_883,115
Other Costs to be Capitalized	N/A	N/A
Acquisition of Building or other Property (excluding land)	N/A	N/A
Total Project Costs	\$2,223,191	
Realized Total Project Costs To Date		\$2,160,649

ALLEICATION AND	CERTIFICATE FOR P.	- 1 141C141		AIA DOCUMENT G702	(Instructions on reverse	Side)		PAGE 1 OF 1
TO (OWNER):	Fresenius Medical Care of PROJECT: Macomb			APPLICATION NO: 5		Distribution to:		
	Illinois, LLC		Z12 E. Calhoun	•	APPLICATION DATE:	12/31/2017		OWNER
	c/o Fresenius Medical Care NA	1	Macomb, IL 61455	-	PERIOD FROM:	12/1/2017		ARCHITECT
	1909 Tyler St., 8th Fl	(6755-1-RL-W-BO-16	2 % - 2 17	PERIOD TO:	12/31/2017	C	ONTRACTOR
	Hollywood, FL 33020							
FROM (CONTRACTOR):	Peoria Metro Construction		VIA (ARCHITECT):		ARCHITECT'S		-	
·	1925 S. Darst	•	Christopher Kidd & Asso	ciates, LLC	PROJECT NO:			
	Peoria, IL 61601	N48W16550 Lisbon Road		·	PMC PROJECT NO:	17113FRES	L	
		1	Menomonee Falls, WI 53	051 CONTRACT DATE: 7/13/17				
				Application is made for F	ayment, as shown below, in c	onnection with the Co	ontract.	
CONTRACTOR'S	APPLICATION FOR F	AYMENT		Continuation Sheet, AL	A Document G703, is attach	ed.		
CHANGE ORDER SUMMARY	Υ			I. ORIGINAL CONTR	ACT SUM		s	955,900.00
Change Orders approved in		ADDITIONS	DEDUCTIONS	2. Net change by Chang	e Order	***************	.s —	3,976.86
previous months by Owner				3. CONTRACT SUM T	O DATE (Line 1+2)		.s	959,876,86
	TOTAL	\$3,977			ED & STORED TO DATE.			927,241.86
Approved this Month				(Column G	on G703)			
Number	Date Approved			5. RETAINAGE:	,		-	
				a. 10% of 0	Completed Work	S 92,724.19	1	
	1				(Column D + E on G703))	•	
				b. 10% of 5	stored Material	\$ 0.00	- 1	
	i i			1	(Column F on G703)		•	
				Total Retai	nage (Line 5a + 5b or			
					Total in Column I of G70)3)	.s	92,724.19
	TOTALS	\$3,976.86	\$0.00	6. TOTAL EARNED L	ESS RETAINAGE	****************	. s 🗀	834,517.67
Net change by Change Orders			\$3,976.86		(Line 4 less Line 5 Total)			
· · · · · · · · · · · · · · · · · · ·				7. LESS PREVIOUS C	ERTIFICATES FOR		1	
The undersigned Contractor cer	rtifies that to the best of the Contracto	r's knowledge, informatie	on and		PAYMENT (Line 6 from	prior Certificate)	. s	738,705.02
belief the Work covered by this Application for Payment has been completed in accordance with the		8. CURRENT PAYMENT DUE			.\$	95,812.65		
Contract Documents, that all amounts have been paid by the Contractor for Work for which previous			9. BALANCE TO FINISH, PLUS RETAINAGE			.s	125,359.19	
Certificates for Payment were issued and payments received from the Owner, and that current				(Line 3 less Line 6)				
payment shown herein is now d	iue,							
~ 1	<i>_</i>			State of: Illinois	7	County of: Peona SUSAN I COX Official Sear		
CONTRACTOR Pooria Moto	o Construction			Subscribed and sworn to		Sign Ticen	were	- 9€1
	(/-(/	:2 00		Notary Public: SW201/	γγ of any Notary	Public - State of Illinois		
By:		Date: 12-27	<i>!-1)</i>	My Commission expires		ecina Evnices New 20 2		
				AMOUNT CERTIFIED.	HIJ COMM		لمسائد	95,812,65
ARCHITECT'S CERTIFICATE FOR PAYMENT		(Attach evaluation if an	nount certified differs from the	amount applied for \				
intolline of the	MINICALE FORTA	# 14#### 4 #		ARCHITECT:	want centiled effects from th	e amount applied tot.)		
In accordance with the Control	t Dogumento board en en elto chase	ations and the data serve	ricina the	ARCHITECT:			- 1	
	t Documents, based on on-site observ	•	-	D			Dat-	
above application, the Architect certifies to the Owner that to the best of the Architect's knowledge,			By:	acticals. The AMOUNT CO	OTIEFED is amustic as	Date:		
information and belief the Work has progressed as indicated, the quality of the Work is in accordance with the Contract Documents, and the Contractor is entitled to payment of the AMOUNT CERTIFIED.			This Certificate is not negotiable. The AMOUNT CERTIFIED is payable only to the Contractor named herein. Issuance, payment and acceptance of payment are without					
with the Contract Documents, a	and the Contractor is entitled to paym	EIL OF THE AMOUNT CE	KIIFIEU,				without	
				prejudice to any rights of	f the Owner or Contractor und	er inis Contract.		

AIA DOCUMENT G702, APPLICATION AND CERTIFICATE FOR PAYMENT, MAY 1983 EDITION, AIA. 1983 THE AMERICAN INSTITUTE OF ARCHITECTS, 1735 NEW YORK AVENUE, N.W., WASHINGTON, D.C. 20006

O (OWNER): Fresenius Medical Care PROJECT: Macomb IL FMC 675 ROM (CONTR.) Cohen Architectural VIA (ARCHITECT): Woodworking DNTRACT FOR: Millwork & Installation	5 APPLICATION NO: PERIOD TO: CONTRACTOR'S PROJECT NO:	3 Jan 2018	Distribution to:		
Woodworking ONTRACT FOR: Millwork & Installation	CONTRACTOR'S	2011 20 IQ	T HATAILED.		
Woodworking ONTRACT FOR: Millwork & Installation			OWNER: ARCHITECT		
DNTRACT FOR: Millwork & Installation	PROJECT NO.		CONTRACTOR		
OUTDACTORIO ADDI IGATION FOR SAVISENT	CONTRACT DATE:		CONTRACTOR		
			•		
ONTRACTOR'S APPLICATION FOR PAYMENT	Application is made for Payment, as shown below, in c		Contract.		
HANGE ORDER SUMMARY Diange Orders approved in ADDITIONS DEDUCTIONS	Continuation Sheet, AIA Document G703, is attached.	EROIM			
	4 ODIOINAL CONTRACT OUR	-			
evious months by Owner	1. ORIGINAL CONTRACT SUM	-AN 23 17	\$ 55,103.00		
TOTAL .	2. Net change by Change Orders		\$ -		
proved this month	3. CONTRACT SUM TO DATE (Line 1 + 2)	ಕ್ಷಣ್ಣ ಸಂಗಾ	\$ 55,103.00		
Number Date Approved	4. TOTAL COMPLETED & STORED TO DATE	CENTO			
	(Column G on G703)		<u>\$ 55,103.00</u>		
	5. RETAINAGE:				
	a. 10% % of Completed Work				
TOTALS 0 0	(Columns D + E on G703)				
et change by Change Orders 0	b. 100 % of Stored Material				
e undersigned Subcontractor certifies that to the best of Subcontractor's knowledge, information	(Column F on G703)		<u></u>		
d belief the Work covered by this Application for Payment has been completed in accordance	Total Retainage (Line 5a + 5b or				
h the Contract Occuments, that all amounts have been paid by the Contractor for Work for	Total in Column I of G703)		\$ -		
ich previous Certificates for Payment were issued and payments received from the Owner, and	8. TOTAL EARNED LESS RETAINAGE		\$ 55,103.00		
at current payment shown herein is now due.	(Line 4 less Line 5 Total)				
	7. LESS PREVIOUS CERTIFICATES FOR PAYMENT	Ť			
ONTRACTOR:	(Line 6 from prior Certificate)		\$ 49,592.70		
	8. CURRENT PAYMENT DUE		\$ 5,510.30		
	9. BALANCE TO FINISH, INCLUDING RETAINAGE		<u> </u>		
Date: 1-17-16	(Line 3 less Line 6)		\$ -		
DAVID BEADLES					
Notary Public - Notary Seal	State of: Missouri County of: Phelps				
STATE OF MISSOURI	Subscribed and sworn to before me this 1714	day of Janua	£1 2010		
Phelps County		day of Jethers	<u>ry</u> 2018		
My Commission Expires: March 29, 2021	Notary Public: DJ 3 My Commission expires: 3 - 29 - 2021				
Commission #17298584					
RCHITECT'S CERTIFICATE FOR PAYMENT	AMOUNT CERTIFIED				
accordance with the contract Documents, based on on-site observations and the data	(Attach explanation if amount certified differs from the	amount applied fo	г.)		
imprising the above application, the Architect certifies to the Owner that to the best	ARCHITECT:				
the Architect's knowledge, information and belief the Work has progressed as indicated					
e quality of the Work is in accordance with the Contract Documents, and the Contractor	By:	D	ate:		
entitled to payment of the AMOUNT CERTIFIED.					
	This Certificate is not negotiable. The AMOUNT CERTIFIED is paye	ble only to the Contrac	dor		
	named herein. Issuance, payment and acceptance of payment are without prejudice to any				
DTICE: PROPERTY OWNERS IMPORTANT INFORMATION	rights of the Owner or Contractor under this Contract.	pyeares to the			
ONCERNING MECHANICS LIENS ON REVERSE SIDE.	. With the control of control and animal area and and animals				